

October 23, 2014

The Honorable Sylvia Mathews Burwell
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Re: Iowa Health and Wellness Plan: NEMT Waiver Amendment

Dear Secretary Burwell:

The undersigned organizations appreciate the opportunity to comment on the proposed non-emergency medical transportation (NEMT) waiver for the Iowa Health and Wellness Plan. Although we support Iowa's bipartisan decision to accept federal Medicaid funding to extend coverage to low-income parents, children and other adults we have substantial concerns regarding Iowa's request for an 18-month extension of the existing waiver for NEMT. We believe that the survey data provided with the request shows that the lack of NEMT is a continuing barrier for accessing care and treatment for a significant portion of Medicaid patients.

The survey data from the University of Iowa Public Policy Center (PPC) found:

- In the past six months, 59% of Iowa Wellness Plan (WP) Members and 43% of Marketplace Choice Members (MPC) needed assistance from other sources to get to their healthcare visit.
- In the past six months, 20% of WP Members and 10% of MPC Members could not get to or from a health care visit because they did not have access to needed transportation.
- In the past six months, 50% of WP Members and 38% of MPC Members worried about their ability to pay for the cost of transportation to or from a health care visit.

Iowa's request submits that a "majority of members do not feel lack of NEMT services is prohibiting access to their provider" but, since NEMT is not a benefit that serves the majority of members, nor was it ever intended to, this is a poor standard to evaluate whether NEMT is a necessary service. In 2001, one study¹ estimated that ten percent of the Medicaid population relied primarily on Medicaid to pay for transportation services to get to medical services.

The survey data from University of Iowa PPC indicates that, even when excluding medically frail, at least 10% of beneficiaries in the demonstration are prohibited from accessing care because of a lack of transportation. This demonstrates that these waiver patients are just as likely as regular Medicaid patients to need NEMT.

While the number of beneficiaries who utilize NEMT may be limited, the benefit is a key component of a plan of care for many patients whose lives depend on frequent medical services

¹ David Raphael, *Medicaid Transportation: Assuring Access to Health Care-A Primer for States, Health Plans, Providers and Advocates*, prepared by the Community Transportation Association of America, January 2001

such as kidney dialysis and cancer care². NEMT has benefits for state budgets as well. A study conducted by Florida State University concluded that if only 1% of medical trips funded resulted in avoidance of an ER hospital visit the payback to the state would be tenfold³.

Another concern with Iowa's request is that it is not following the amendment process spelled out in the CMS approved waiver. At the very least, CMS should have allowed for a formal 30-day comment period at the state-level prior to the waiver's submission and should require that the amendment be submitted 120 days prior to the date of the proposed implementation.

We respectfully and strongly request that you deny Iowa's request for an extension and allow Medicaid patients access to the full range of services NEMT can facilitate. Based on our information, this will improve the quality of medical services and reduce inpatient services and emergency transportation.

Please contact Marsha Simon (msimon@mjsimonandcompany.com) at MJ Simon and Company if you would like any additional information.

CC: Cynthia Mann, Eliot Fishman

The Community Transportation Association of America
The American Public Transportation Association
Children's Health Fund
Health Outreach Partners
The National Association of Community Health Centers

² Community Transportation Association of America, *Medicaid Expansion and Premium Assistance: The Importance of NEMT to Coordinate Care for Chronically Ill Patients*. February 2014

³ Florida Transportation Disadvantaged Programs Return On Investment Study Prepared By The Marketing Institute / Florida State University's College of Business – Dr. J. Joseph Cronin, Jr., March 2008